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DRUG CONTROL

Reauthorization of the Office of National Drug Control Policy

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Drug Control: Reauthorization of the Office of National Drug Control Policy

Over the years, GAO has issued numerous reports on the nation's drug control efforts. These reports show a consistent theme: the nation's effort to control illegal drugs is complex, fragmented among many agencies, and hindered by the absence of meaningful performance measures to gauge progress and to guide decisionmaking to better ensure that limited resources are put to the best use.

In 1983, GAO concluded that there was a need to coordinate the nation's drug control efforts and recommended that the President make a clear delegation of responsibility to one individual to strengthen oversight of federal drug enforcement programs. Since then, GAO has periodically concluded that there is a continuing need for a central planning agency. Congress addressed this issue through the Anti-Drug Abuse Act of 1988, which created the Office of National Drug Control Policy (ONDCP) to better plan a nationwide drug control effort and assist Congress in overseeing that effort. ONDCP was initially authorized through November 1993 and later reauthorized through September 30, 1997.

GAO's recent work shows that there are some promising initial research results in the area of demand reduction but that international supply reduction efforts have not reduced the availability of drugs. GAO's work also shows that the nation still lacks meaningful performance measures to help guide decisionmaking. GAO has acknowledged that performance measurement in the area of drug control is particularly difficult for a variety of reasons. Notwithstanding, GAO has concluded over the years that better performance measures than the ones in place were needed. In 1993, GAO recommended that Congress, as part of its reauthorization of ONDCP, direct the agency to develop additional performance measures.

In reauthorizing ONDCP in 1994, Congress specified that ONDCP's performance measurement system should assess changes in drug use, drug availability, the consequences of drug use, drug treatment capacity, and the adequacy of drug treatment systems. ONDCP's initial effort, with a private contractor, did not prove fruitful, and, in the summer of 1996, it began a new effort involving working groups composed of representatives from federal drug control agencies and state, local, and private organizations. The working groups have been tasked with establishing performance measures for the goals set forth in the 1997 national strategy articulated by ONDCP. As of April 15, 1997, no new measures had been approved by the ONDCP Director.

Summary
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of National Drug Control Policy

Given the complexity of the issues and the fragmentation of the approach to the national drug strategy among more than 50 federal agencies, GAO continues to believe that there is a need for a central planning agency, such as ONDCP, to coordinate the nation's efforts. GAO notes that, while it is difficult to gauge ONDCP's effectiveness given the absence of good performance measures, GAO has found no compelling evidence that would lead it to advise against ONDCP's reauthorization for a finite period of time.

Drug Control: Reauthorization of the Office of National Drug Control Policy

Mr. Chairman and Members of the Subcommittee:

I am pleased to be here today to discuss the Office of National Drug Control Policy (ONDCP). My testimony focuses on (1) our recent work on federal drug control efforts; (2) ONDCP's efforts to implement performance measures; (3) ONDCP's anticipated actions to lead the development of a centralized lessons-learned data system for drug control activities; and (4) whether ONDCP, which is scheduled to expire in September of this year, should be reauthorized.

Background

In 1988, Congress created ONDCP to better plan the federal drug control effort and assist it in overseeing that effort. ONDCP was initially authorized for 5 years—until November 1993. With the enactment of the Violent Crime Control and Law Enforcement Act of 1994 (P.L. 103-322 (1994)), ONDCP was reauthorized until September 30, 1997.

ONDCP is responsible for overseeing and coordinating the drug control efforts of over 50 federal agencies and programs. ONDCP is also charged with coordinating and reviewing the drug control activities of hundreds of state and local governments as well as private organizations to ensure that the drug control effort is well coordinated and effective at all levels.¹

Under the 1988 act, ONDCP is to (1) develop a national drug control strategy with short- and long-term objectives and annually revise and issue a new strategy to take into account what has been learned and accomplished during the previous year, (2) develop an annual consolidated budget providing funding estimates for implementing the strategy, and (3) oversee and coordinate implementation of the strategy by federal agencies. Since its inception, ONDCP has published nine annual national drug control strategies.

Some highlights of the 1997 strategy include: (1) explicit recognition that demand reduction must be the centerpiece of the national antidrug effort; (2) a commitment to robust international drug interdiction programs; and (3) making prevention of drug use by youth the top priority. The 1997 strategy sets forth five goals, including both supply and demand drug control efforts:

¹ONDCP is also responsible for designating and providing overall policy guidance and oversight for the High Intensity Drug Trafficking Areas (HIDTA) Program and operating the Counterdrug Technology Assessment Center (CTAC), which serves as the counterdrug enforcement research and development center for the federal government.

“1. Educate and enable America’s youth to reject illegal drugs as well as the use of alcohol and tobacco.

“2. Increase the safety of America’s citizens by substantially reducing drug-related crime and violence.

“3. Reduce health and social costs to the public of illegal drug use.

“4. Shield America’s air, land, and sea frontiers from the drug threat.

“5. Break foreign and domestic sources of supply.”

The administration’s drug control budget request for fiscal year 1998 is approximately \$16 billion, an increase of \$818 million over the 1997 budget. Approximately \$5.5 billion is targeted for demand reduction, an increase of 10 percent over the 1997 budget and \$10.5 billion for supply reduction, an increase of 3.2 percent over the 1997 budget.²

Recent GAO Work on Federal Drug Control Efforts

At the request of the Chairman, Subcommittee on Transportation and Related Agencies and the Chairman, Subcommittee on Labor, Health and Human Services, and Education, House Committee on Appropriations, on the demand reduction side we recently identified findings of current research on promising approaches in drug abuse prevention targeted at school-age youth and described promising drug treatment strategies for cocaine addiction. On the supply reduction side, we summarized our recent work assessing the effectiveness of international efforts, including interdiction, to reduce illegal drug availability.³

We reported that recent research points to two types of promising drug prevention approaches for school-age youth. The first approach emphasizes drug resistance skills, generic problem-solving/decisionmaking training, and modification of attitudes and norms that encourage drug use (the psychosocial approach). The second approach involves the coordinated use of multiple societal institutions, such as family, community, and schools, for delivering prevention programs (the comprehensive approach). Early research has

²As defined in the Anti-Drug Abuse Act of 1988, P.L. 100-690, demand reduction includes drug abuse education, prevention, treatment, research, and rehabilitation. Supply reduction includes international drug control; foreign and domestic drug enforcement intelligence; interdiction; and domestic drug law enforcement, including law enforcement directed at drug users.

³Drug Control: Observations on Elements of the Federal Drug Control Strategy (GAO/GGD-97-42, Mar. 14, 1997).

demonstrated that both approaches have shown some success in reducing student drug use as well as strengthened individuals' ability to resist drugs in both short- and longer-term programs.

Three approaches have been found to be potentially promising in the treatment of cocaine use. These approaches include (1) avoidance or better management of drug-triggering situations (relapse prevention therapy); (2) exposure to community support programs, drug sanctions, and necessary employment counseling (community reinforcement/contingency management); and (3) use of a coordinated behavioral, emotional, and cognitive treatment approach (neurobehavioral therapy). Research shows that many drug dependent clients using these approaches have maintained extended periods of cocaine abstinence and greater retention in treatment programs.

While these prevention and treatment approaches have shown promising outcomes in some programs, further evaluative research would have to be conducted to determine their effectiveness and their applicability among different populations in varied settings. Such research should help policymakers better focus efforts and resources in an overall drug control strategy.

Regarding international drug control efforts, our work has shown that, despite some successes, efforts have not materially reduced the availability of drugs in the United States for several reasons. First, international drug trafficking organizations have become sophisticated, multibillion dollar industries that quickly adapt to new U.S. drug control efforts. Second, the United States faces other significant and long-standing obstacles, such as inconsistent funding, competing foreign policy objectives, organizational and operational limitations, and a lack of ways to tell whether or how well counternarcotics efforts are contributing to the goals and objectives of the national drug control strategy, and the resulting inability to prioritize the use of limited resources. Third, in drug-producing and transit countries, counternarcotics efforts are constrained by competing economic and political policies, inadequate laws, limited resources and institutional capabilities, and internal problems such as terrorism and civil unrest.

Recognizing that there is no panacea for resolving all of the problems associated with illegal drug trafficking, and consistent with the intent of

the Government Performance and Results Act (GPRA),⁴ we recently made several recommendations to the Director of ONDCP to better comply with the 1988 Anti Drug Abuse Act's requirements. We recommended that ONDCP complete the development of a long-term plan with meaningful performance measures and multiyear funding needs that are linked to the goals and objectives of the international drug control strategy. In particular, such a plan would permit ONDCP to better carry out its responsibility to at least annually review the progress made and adjust its plan, as appropriate. Further, we recommended that ONDCP enhance support for the increased use of intelligence and technology to (1) improve U.S. and other nations' efforts to reduce supplies of and interdict illegal drugs and (2) take the lead in developing a centralized lessons-learned data system to aid agency planners and operators in developing more effective counterdrug efforts.⁵

ONDCP's Efforts to Implement Performance Measures

We have acknowledged for many years that performance measurement in the area of drug control has been difficult. In 1988 and again in 1990, we reported that (1) it was difficult to isolate the full impact and effectiveness of a single program, such as drug interdiction, on reducing drug use without considering the impact of prevention and treatment efforts; (2) the clandestine nature of drug production, trafficking, and use had limited the quality and quantity of data that could be collected to measure program success; and (3) the data that were collected—for example, the data used to prepare estimates of drug availability and consumption—were generally not designed to measure program effectiveness.⁶

⁴GPRA (P.L. 103-62 (1993)) was enacted to improve performance measurement by federal agencies. It provides a useful framework for assessing the effectiveness of federal drug control efforts. Under GPRA, it is envisioned that each federal agency—defined as an executive department, government corporation, and an independent establishment—will move away from its concentration on traditional workload measures, such as staffing and activity levels, and move toward a focused assessment of results. GPRA requires each federal agency to develop two types of plans—a strategic plan and annual performance plans. Strategic plans are to cover a period of at least 5 years and include the agency's mission statement; identify the agency's long-term strategic goals; and describe how the agency intends to achieve those goals through its activities and through its human, capital, information, and other resources. Annual performance plans provide the direct linkage between the strategic goals outlined in the agency's strategic plan and what managers and employees do day to day. In addition, the performance plan is to contain the performance goals the agency will use to gauge its progress toward accomplishing its strategic goals and identify the performance measures the agency will use to assess its progress.

⁵Drug Control: Long-Standing Problems Hinder U.S. International Efforts (GAO/NSIAD-97-75, Feb. 27, 1997).

⁶Controlling Drug Abuse: A Status Report (GAO/GGD-88-39, Mar. 1, 1988) and Drug Interdiction: Funding Continues to Increase but Program Effectiveness Is Unknown (GAO/GGD-91-10, Dec. 11, 1990).

In a 1993 report,⁷ we concluded that although difficulties, such as the interrelated nature of programs, may have precluded the development of “perfect” or “precise” performance measures, these difficulties should not have stopped antidrug policymakers from developing the best alternative measures—measures that could provide general indicators of what was being accomplished over the long term.

We also reported in 1993 that ONDCP’s national strategies did not contain adequate measures for assessing the contributions of component programs for reducing the nation’s drug problems. In addition, we found little information on which to assess the contributions made by individual drug control agencies. As a result, we recommended that, as part of its reauthorization of ONDCP, Congress direct the agency to develop additional performance measures. In reauthorizing ONDCP in 1994, Congress specified that ONDCP’s performance measurement system should assess changes in drug use, drug availability, the consequences of drug use,⁸ drug treatment capacity, and the adequacy of drug treatment systems.

Similarly, in our most recent report,⁹ we found it still difficult to assess the performance of individual drug control agencies. For example, increased Customs Service inspections and use of technology to detect drugs being smuggled through ports of entry may cause smugglers to seek other routes; this would put more pressure on drug interdiction activities of other agencies, such as the Coast Guard. We concluded that it was important to consider both ONDCP and operational agency data together because results achieved by one agency in reducing the use of drugs may be offset by less favorable results by another agency.

According to ONDCP officials, around January 1994, they, in collaboration with the Department of Defense, entered into a contract with a private contractor to develop “measures of effectiveness” in the international arena. According to ONDCP officials, overall the results of the contractor’s efforts did not prove useful in developing performance measures for ONDCP. The efforts of the contractor were eventually abandoned, and in the summer of 1996 ONDCP began a new effort to develop performance measures for all drug control operations.

⁷Drug Control: Reauthorization of the Office of National Drug Control Policy (GAO/GGD-93-144, Sept. 29, 1993).

⁸Consequences of drug use include burdens drug users place on hospital emergency rooms in the United States, national health care costs of drug use, drug-related crime and criminal activity, and contribution of drugs to the underground economy.

⁹GAO/GGD-97-42.

The new effort relies on working groups, which consist of representatives from federal drug control agencies and state, local, and private organizations, to develop national drug control performance measures. According to ONDCP officials, early in 1997, the ONDCP working groups began developing performance targets (measurable milestones to track progress) and performance measures (the data used to track each target) for each of the objectives. As of April 1997, the plans for one of its five goals—"shield America's air, land, and sea frontiers from the drug threat"—were ready for the Director's approval, and they will be distributed to the affected agencies for agreement. ONDCP officials told us they are not yet that far along on the other four goals.

Centralized Data Systems: Lessons Learned

As previously mentioned, we recently recommended in our report on international antidrug activities that ONDCP strengthen its planning and implementation of antidrug activities through the development of an after-action reporting system similar to the Department of Defense's (DOD) system.¹⁰ Under DOD's system, operations reports describe an operation's strengths and weaknesses and contain recommendations for consideration in future operations. A governmentwide after-action system for reporting international antidrug activities should allow agencies to learn from the problems and impediments encountered internally and by other federal agencies in implementing past operations. With such information, the agencies would be in a better position to develop plans that avoid past problems or contingencies in known problem areas. This governmentwide after-action system should go a long way toward meeting ONDCP's basic responsibility of taking into account what has been learned and accomplished during the previous year and adjusting its plan accordingly. As of April 15, 1997, ONDCP officials said they had not yet implemented this recommendation. According to these officials, ONDCP is currently preparing a formal response to the Subcommittee on National Security, International Affairs, and Criminal Justice, Committee on Government Reform and Oversight, explaining how it plans to implement this recommendation.

¹⁰GAO/NSIAD-97-75.

The Need Continues for a Central Planning Agency to Coordinate Drug Control Efforts

Over the years, we have concluded there is a continuing need for a central planning agency, such as ONDCP, to coordinate the nation's drug control efforts. Before ONDCP existed, we recommended in 1983 that the President make a clear delegation of responsibility to one individual to oversee federal drug enforcement programs to strengthen central oversight of the federal drug enforcement program.¹¹ Again in 1988,¹² we reported problems caused by the fragmentation of federal antidrug efforts among cabinet departments and agencies, and the resulting lack of coordination of federal drug abuse control policies and programs. In 1993,¹³ we concluded that given the severity of the drug problem and the large number of federal, state, and local agencies working on the problem, there was a continuing need for a central planning agency, such as ONDCP, to provide leadership and coordination for the nation's drug control efforts. We recommended that Congress reauthorize ONDCP for an additional finite period of time.

Coordinating the 5 goals of the national drug control strategy among more than 50 federal agencies is a complex process. Our analysis of federal agencies that contribute to the implementation of each of the 5 strategy goals showed an average of 21 agencies were committing resources to address specific strategy goals. For example, Goal 1 involves 18 agencies, Goals 2 and 3 involve 24, Goal 4 involves 13, and Goal 5 involves 28. Further, we found that more than 30 agencies are committing resources to implement two or more of the five strategy goals.

Given the complexity of the issues and the fragmentation of the approach to the national drug control strategy among more than 50 agencies, we continue to believe there is a need for a central planning agency, such as ONDCP, to coordinate the nation's drug control efforts. In addition, we have found no compelling evidence to lead us to advise against ONDCP's reauthorization for a finite period of time.

Mr. Chairman, this completes my statement. I would be pleased to answer any questions you or the other Subcommittee members might have.

¹¹Federal Drug Interdiction Efforts Need Strong Central Oversight (GAO/GGD-83-52, June 13, 1983).

¹²GAO/GGD-88-39.

¹³GAO/GGD-93-144.

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